|  | CLAIMS AS                                 | 7              | PART                 |                               | mn 2)            | SMALLE     | _:                      | OR     | OTHER<br>SMALL | THAN                   |
|--|---|----------------|----------------------|-------------------------------|------------------|------------|-------------------------|--------|----------------|------------------------|
| TOTAL CLAIMS   |   | ·              |                      | (00.0                         | 11.15/           | RATE       | FEE                     | 1<br>1 | RATE           | FEE                    |
| FOR  |   | NUMBER FILED   |                      | NUMBER EXTRA                  |                  | BASIC FEE  | ί.                      | OR     | BASIC FEE      | 1000                   |
| TOTAL CHARGEABLE CLAIMS  |   | 32 minus 20=   |                      | . 12                          |                  | X\$ 9=     |                         | OR     | X\$18=         | 216                    |
| NDEPENDENT CLAIMS  |   | // minus 3 =   |                      | 2                             |                  | X40=       |                         | OR     | X80=           | 560                    |
| MULTIPLE DEPENDENT CLAIM P   |   | RESENT         |                      |                               |                  |            |                         |        | +270=          | 160                    |
| If the difference in column 1 is less than zero, enter "0" in column 2 |   |                |                      |                               |                  | +135=      |                         | OR     |                | 177/                   |
| 1.0175   |   |                |                      |                               |                  | TOTAL      |                         | OR     | TOTAL OTHER    | 1776                   |
| (2/1 /1:C  | (Column 1)                                | MENDE          | Colu) - C            |                               | (Column 3)       | SMALL      | ENTITY                  | OR     | SMALL          |                        |
| Total Independent  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                | HIGH<br>NUM<br>PREVI |                               | PRESENT<br>EXTRA | RATE       | ADDI-<br>TIONAL<br>FEE  |        | RATE           | ADDI-<br>TIONAL<br>FEE |
| Total  | · 12)                                     | Minus          | .3                   | 2)                            | =                | X\$ 9=     |                         | OR     | X\$18=         |                        |
| Independent  | -10                                       | Minus          | ••• /                | 0                             | =                | X40=       |                         | OR     | X80=           |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM                         |   |                |                      |                               |                  | +135=      |                         | OR     | +270=          |                        |
|  |   |                |                      |                               |                  | TOTAL      |                         | -      | TOTAL          |                        |
| <u>.</u>   |   |                |                      | -                             | (O-1 0)          | ADDIT. FEE |                         | OR     | ADDIT. FEE     | <u> </u>               |
|  | (Column 1)<br>CLAIMS                      | Name of Street | HIG                  | mn 2)<br>HEST                 | (Column 3)       |            | ADDI-                   | 1      |                | ADDI-                  |
| Total Independent  | REMAINING<br>AFTER                        |                | PREV                 | ABER<br>OUSLY                 | PRESENT<br>EXTRA | RATE       | TIONAL<br>FEE           |        | RATE           | TIONAL<br>FEE          |
| Total  | AMENDMENT                                 | Minus          | PAIL                 | FOR                           |                  | X\$ 9=     |                         | OR     | X\$18=         |                        |
| Independent  | •   | Minus          | ***                  |                               | =                | X40=       | <u> </u>                | 1      | X80=           |                        |
| FIRST PRESE  | NTATION OF M                              | ULTIPLE DE     | PENDEN               | T CLAIM                       |                  |            |                         | OR     |                |                        |
|  |   |                |                      |                               |                  | +135=      |                         | OR     | +270=<br>TOTAL |                        |
|  |   |                |                      |                               |                  | ADDIT. FEE |                         | OR     | ADDIT. FEE     |                        |
|  | (Column 1)                                |                |                      | mn 2)                         | (Column 3)       |            |                         | _      |                |                        |
| Total Independent  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                | NUI<br>PREV          | HEST<br>MBER<br>IOUSLY<br>FOR | PRESENT<br>EXTRA | RATE       | ADDI-<br>TIONAL:<br>FEE |        | RATE           | ADDI-<br>TIONAL<br>FEE |
| Total  | •   | Minus          | **                   |                               | =                | X\$ 9=     |                         | OR     | X\$18=         | ,                      |
| IOM  | •   | Minus          | ***                  |                               | 8                | X40=       |                         | OR     | X80=           |                        |
| Independent  |   |                |                      | TO MIL                        |                  |            |                         | 104    |                | 4                      |
| Independent FIRST PRESE  | NTATION OF M                              | CULTIPLE DE    | PENDEN               | T CLAIN                       |                  | +135=      |                         | OR     | +270=          |                        |